

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): MUNOZ ET AL.

Docket No.

HOLMES-2U

Application No.

10/797,230

Filing Date

02/10/2004

Examiner

K.T. NGUYEN

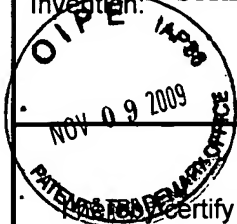
Customer No.

75253

Group Art Unit

3714

Invention.

STREAMER LAUNCHING SYSTEM

I hereby certify that the following correspondence:

RESPONSE TO FINAL OFFICE ACTION*(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

NOVEMBER 9, 2009*(Date)***Gerow D. Brill***(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)***EH 299967092 US***("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**



EH 299967092 US

**EXPRESS
MAIL****Mailing Label**

Label 11-B, March 2004

UNITED STATES POSTAL SERVICE®

Post Office To Addressee**DELIVERY (POSTAL USE ONLY)**

Delivery Attempt	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day			
Delivery Attempt	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day			
Delivery Date	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day			

CUSTOMER USE ONLY

PAYMENT BY ACCOUNT
Express Mail Corporate Acct. No.

Federal Agency Acct. No. or
Postal Service Acct. No.

☐ **WAIVER OF SIGNATURE (Domestic Mail Only)**
Additional merchandise insurance is void if customer requests waiver of signature. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

☐ **NO DELIVERY**
☐ Weekend ☐ Holiday ☐ Mailer Signature

ORIGIN (POSTAL SERVICE USE ONLY)

PO ZIP Code	Day of Delivery	Postage	
	<input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	\$	
Date Accepted	Scheduled Date of Delivery	Return Receipt Fee	
Mo. Day Year	Month Day	\$	
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	Scheduled Time of Delivery	COD Fee	Insurance Fee
	<input type="checkbox"/> Noon <input type="checkbox"/> 3 PM	\$	\$
Flat Rate <input type="checkbox"/> or Weight	Military	Total Postage & Fees	
lbs. ozs.	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	\$	
	Int'l Alpha Country Code	Acceptance Emp. Initials	

FROM: (PLEASE PRINT)

PHONE ()

GEORGE D. BRILL
20 OAKMONT CIRCLE
NEW FREEDOM, PA 17349

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MAIL STOP AF
COMMISSIONER FOR PATENTS
PO Box 1450
ALEXANDRIA, VA

ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES.)

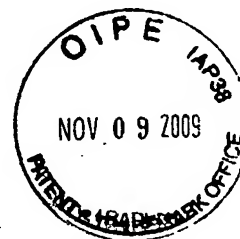
2 2 3 1 3 + 1 4 5 0

FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW.

RECEIVED IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Regards to Response to a Final Office Action in Application Number 10/797,230
Docket Number Holmes-U2

Combined Amendment and Petition for Extension (2 pages)
Response and Remarks (4 pages)
Replacement Drawings 4, 5, and 6 (2 pages)
Certificate of Mailing by Express Mail (1 page)



EH299967092US

November 9, 2009

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